



**(A) County Perspective on Access to Mental Health  
Services for Individuals with Alzheimer's Disease and  
Related Disorders  
Dr. Rob Oldham  
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# Disclaimer

- Thoughts shared today are my own, and do not necessarily represent those of Placer County, CBHDA, CSAC, etc.




# Reflections on the Dementias (NCDs)

- They ARE psychiatric disorders
- With enough time, they almost always WILL advance to cause serious dysfunction.
- Most psychiatrists (and many other mental health professionals) are trained to diagnose and treat them.
- They generally DO respond to psychiatric treatments.
  - Medications
  - Psychotherapy
  - Rehabilitation
  - Psychosocial support
  - Case management



# Dementia and “specialty mental health” settings

- Patients with dementias often do better when treated in a “specialty mental health” setting
  - Some modifications (usually minor) to these settings may be needed
  - Usually more concerns from SMH clients and staff than those with dementia diagnoses and their families

A close-up photograph of several bright orange fruits hanging from a tree with green leaves. The image is partially obscured by a blue curved line that separates it from the text area.

# Dementias look like and co-occur with other psychiatric disorders

- High prevalence of serious psychiatric symptoms and impairment from dementias
- Very high co-occurrence with other psychiatric disorders
- Still, people with dementias very rarely get treated in specialty mental health settings
- Seems especially true for Medicaid beneficiaries in California

# Why?

- History
- Policy
- Training
- Culture
- Stigma
- Not measuring!
- Resources





# Proposed Solutions

- Start requiring reporting of number of claims and/or prevalence of co-occurring dementia diagnoses (for both Counties and managed care plans)
- New funding for mental health providers/ plans to treat dementias (and maybe also TBI, ID/DD?)
  - Bundled payments?
  - Shared savings?
  - “Collective impact” model
- Additional education/ training
  - Mental health providers
  - Medical providers
  - Community groups/ advocates
  - Clients/ families

# Hope for the Future

- Dementia treatment advances in the next 1-2 decades have the potential to:
  - Better alleviate symptoms
  - Slow/ prevent progression
  - Perhaps even reverse degeneration
- In addition, extensive effort underway to improve physical health of people experiencing other serious mental illnesses
- Both of these trends are likely to converge to make dementias much more often and much more successfully treated in specialty mental health settings
- Will probably need a push...



# Questions/Comments?

**Robert L. Oldham, M.D., M.S.H.A.**

Health Officer/Medical Director/Public Health Director  
Placer County Health and Human Services

(530) 745-3121 | (530) 889-7198 fax | [placer.ca.gov](http://placer.ca.gov)